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Jan 22 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000079620 (7)

1. Corporation Name  
UNITED DOLLAR INC.



Principal Place of Business  
5208 N.W. 165 STREET  
MIAMI FL 33014

Mailing Address  
5208 N.W. 165 STREET  
MIAMI FL 33014-6231

3. Date Incorporated or Qualified 10/16/1995  
3a. Date of Last Report 04/27/1996

2. Principal Place of Business  
21 7900 N.W. 27th Ave  
2a. Mailing Address  
26 7900 N.W. 27th Ave

4. FEI Number 65-0644997  
Applied For  Not Applicable

Suite, Apt. #, etc.  
22 79, North Side Shopping Center  
Suite 79, North Side Sh.

5. Certificate of Status Desired  \$8.75 Additional Fee Required

City & State  
23 Miami, Florida  
28 Miami, Florida

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

Zip  
24 33147  
Country  
25 USA  
29 33147  
30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHAGANI, FIRDOUS  
5208 N.W. 165 STREET  
MIAMI FL 33014

81 Name CHAGANI, FIRDOUS  
82 Street Address (P.O. Box Number is Not Acceptable)  
7900 N.W. 27th Ave  
83 Suite 79 North Side Sh. Center  
84 City Miami FL 85 Zip Code 33147

11. Pursuant to the provisions of Sections 607.01(2) and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Firdous Chagani* FIRDOUS CHAGANI P/V/S 1-12-97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		DELETE
TITLE	D	<input type="checkbox"/>
NAME	CHAGANI, FIRDOUS	
STREET ADDRESS	5208 N.W. 165 STREET	
CITY - ST - ZIP	MIAMI FL 33014	
TITLE	D	<input checked="" type="checkbox"/>
NAME	CHARANIA, MAHMOOD R	
STREET ADDRESS	5208 N.W. 165 STREET	
CITY - ST - ZIP	MIAMI FL 33014	
TITLE	D	<input checked="" type="checkbox"/>
NAME	VALLANI, RAFIK A	
STREET ADDRESS	5208 N.W. 165 STREET	
CITY - ST - ZIP	MIAMI FL 33014	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	P - V.P. - Sec	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	CHAGANI FIRDOUS		
1.3 STREET ADDRESS	7900 N.W. 27th Ave Suite 79		
1.4 CITY - ST - ZIP	Miami Fla. 33147		
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Firdous Chagani* 1/12/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)